2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004293

Entity Name: SOCIETY FOR THE EXPERIMENTAL ANALYSIS OF BEHAVIOR,

INC.

FILED Feb 08, 2016 Secretary of State CC0355594347

Current Principal Place of Business:

SOCIETY FOR THE EXPERIMENTAL ANALYSIS OF BEHAVIOR 825 LELAND AVE. APT.2N ST. LOUIS, MO 63130

Current Mailing Address:

SOCIETY FOR THE EXPERIMENTAL ANALYSIS OF BEHAVIOR 825 LELAND AVE. APT.2N ST. LOUIS, MO 63130 US

FEI Number: 35-1088740 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WUNDERLICH, KARA L DEPARTMENT OF PSYCHOLOGY UNIVERSITY OF FLORIDA GAINESVILLE, FL 32611 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KARA L. WUNDERLICH 02/08/2016

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

Name PIAZZA, CATHLEEN PHD Name SANABRIA, FEDERICO PHD

Address MUNROE-MEYER INSTITUTE Address DEPARTMENT OF PSYCHOLOGY

985450 NEBRASKA MEDICAL CENTER ARIZONA STATE UNIVERSITY PO BOX 871104

OMAHA NE 68198 TEMPE AZ 85287-1104 City-State-Zip: City-State-Zip:

ST Title Title ASST. SECRETARY Name ROANE, HENRY S PHD Name CORCORAN, SHARON

Address **DEPTS OF PEDIATRICS AND** Address SOCIETY FOR THE EXPERIMENTAL

ANALYSIS OF BEHAVIOR **PSYCHIATRY** SUNY UPSTATE MEDICAL 825 LELAND AVE. APT.2N

UNIVERSITY 750 E. ADAMS STREET City-State-Zip: ST. LOUIS MO 63130

SYRACUSE NY 13210 City-State-Zip:

Title **EXECUTIVE SECRETARY**

Name SOTO, PAUL PHD

DEPT. OF EDUCATIONAL PSYCH & Address

LEADERSHIP

TEXAS TECH UNIVERSITY

City-State-Zip: LUBBOCK TX 79409

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

02/08/2016 ASST. SIGNATURE: SHARON CORCORAN SECRETARY/TREASURER